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Г	Onder the Paper	TENT APP	d of 1995,	no persons are	required to respon	nd to a collection of in	nformation un	less it disp	lays a valid OMB	control number
L		TENT AFF	Subs	titute for Form	ON RECORD	N RECORD		Application or Docket Number 10 1089554		
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL	SMALL ENTITY		OTHER THAN SMALL ENTITY	
	FOR NUMBER FILED NUMBER EXTRA					RATE	FEE	7		
BASIC FEE (37 CFR 1.16(a))						7	395	1	RATE	,790
	TOTAL CLAIMS (37 CFR 1.16(c))				x s 25 =	0.0	OR	× 50 =	3.7.70	
	INDEPENDENT CLAIMS 2 minus 3 = .				× \$100 =		OR	× 300 =	 	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						1		OR		-/
\vdash		· · · · · · · · · · · · · · · · · · ·			+ \$180 =	 	OR	+:360=	7	
* If the difference in column 1 is less than zero, enter *0* in column 2.						TOTAL	L	OR	TOTAL	790
١,	(CLAIMS AS A	MENDE	D – PART II						
0	<u>:30.00</u>	(Column 1)		(Column 2) (Column 3)	SMALL E	ENTITY	OR	OTHER SMALL	
A		CLAIMS REMAINING	-	HIGHEST NUMBER	PRESENT	RATE	ADDI-]	RATE	
ENJ	XCE	AFTER AMENDMENT		PREVIOUSL' PAID FOR	YEXTRA		TIONAL		RAIE	ADDI- TIONAL
AMENDMENT	Total (37 CFR 1.16(c))	1.14	Minus	20	= /	x 2 35 =		ØR	× 50	FEE
ÆN	Independent (37 CFR 1.16(b))	2	Minus	"3	=	×+100=		OR OR	× \$ 200=	
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 5/80 =		OR	+5360=	<u>-</u>
						TOTAL			TOTAL	
		(Column 1)		(Column 2)	(6-1	ADD'L FEE		OR	ADD'L FEE	
AMENDMENT B		CLAIMS REMAINING	T	(Column 2) HIGHEST	(Column 3)			ı		
	Total	AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	(37 CFR 1.16(c))		Minus		= ,	x 5 <u>25</u> =		OR	× 550 =	
	Independent (37 CFR 1.16(b))		Minus			x s 100 =		OR	x s 200=	
∢.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ 180=		OR	+ \$360=	
						TOTAL ADD'L FEE		OR L	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			OI (YOU CLEE	
AMENDMENT C		CLAIMS REMAINING	·	HIGHEST	PRESENT			Γ		
	Total	AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	(37 CFR 1.16(c))		Minus	••	=	× s <u>25</u> =		OR	× 550 =	
劕	Independent (37 CFR 1.16(b))	•	Minus	***	=	× s <u>100</u> =			× \$200 =	
8	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$180 =			+ :360=	
					TOTAL ADD'L FEE			TOTAL		
4	If the entry in co	olumn 1 is less tha lumber Previously	n the entry	in column 2, writ	e "0" in column 3.	<u> </u>		OR /	ADD'L FEE	
***	if the Highest N	lumber Previously	Paid For"	IN THIS SPACE I	is less than 3 ent	ner 20 . er "3".				

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the INSPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.